



Outcomes Plan – Program or Project Support
Complete this document and upload to the online application.
The Outcomes Plan should not exceed five pages in total.

rev. 12.2013

1. Organization Name

Mental Health Center of Denver

2. Program or Project Name

Capacity Building To Assist Faith Communities Working with Refugees and Immigrants

3. Impact You Seek

A statement of the problem the organization is trying to solve with this program or project and how the community will look different if/when the organization succeeds.

This planning/capacity-building project has several elements that together will improve the condition of vulnerable immigrant and refugee community members. Broadly speaking, the project's success will a) overcome the isolation and wariness that prevents members of immigrant and refugee communities from obtaining the behavioral assistance they need, and b) promote sensitive, accommodating and responsive experience when they do seek assistance.

Special outreach to faith communities will foster greater connection between the mental health center and members of immigrant and refugee communities who would benefit from behavioral health care. The deployment of community liaisons/navigators who have lived experiences and cultural connections with immigrant and refugee community members will serve this same function. Signage and modifications to the Mental Health Center of Denver website also will reassure members of these vulnerable communities that mental health center locations are safe and welcoming spaces for them.

This project will improve the capacity of the mental health center to ensure that the interactions of members of immigrant and refugee communities with the mental health center are universally positive, welcoming and culturally sensitive. We will achieve this by training staff members and implementing a directory and associated systems to rapidly access staff members or other persons whose lived experience and/or cultural background may be especially helpful in forging connections and alleviating stress.

4. Target Population(s) Characteristics

A descriptive list of characteristics of the population(s) the organization seeks to serve with this program or project including, but not limited to: age, geographic location, ethnicity, and economic background.

Through this project, the Mental Health Center of Denver seeks to serve faith communities and our staff who are assisting immigrants and refugees of all ages, ethnicities and economic backgrounds in the Denver metro area. These communities have been negatively impacted by the current administration's policies, and we have tracked a spike in their need of mental health services to live a vibrant life where they can contribute socially, economically and holistically to the betterment of our greater community. Thus, through this program we aim to include and support all people who fit the above demographic characteristics.

5. Key Assumptions/Rationale for the Program

A bulleted list of the assumptions upon which the program or project is based. Cite existing data in support of your Assumptions when available.

- Social pressures and stresses experienced by immigrants and refugees have grown significantly since the beginning of the 2016 election, and public policy initiatives since January have only amplified the distress experienced by these communities.
- Immigrants and refugees have reported not feeling safe leaving their homes, let alone coming in for needed services. Knowing that faith communities can serve as safe havens for all people, we assume that by working with these leaders we can bring sufficient reassurance such that immigrants and refugees will feel comfortable in accessing mental health services when needed.
- February 1, 2017 news release from the American Psychological Association: [Trump Administration Orders Pose Harm to Refugees, Immigrants, Academic Research and International Exchange, According to Psychologists](#)
- Migration Policy Institute: [Data and Analysis Related to Trump Administration Executive Orders on Immigrants and Refugees](#)
- WBUR Public Radio: [Trump's Aggressive Immigration Policies Have Created A Public Health Disaster](#)
- Harvard Law School, Harvard Immigration and Refugee Clinical Program: [The Impact of President Trump's Executive Orders on Asylum Seekers](#)

6. Position in the Field

Describe other organizations' work to address the same problem/issues addressed by your organization and how your approach is similar or different.

There are a number of organizations doing excellent work on behalf of immigrants and refugees, and we are eager to form collaborative relationships with them. While each organization is helping with resettlement into our communities, there are few if any that focus on using our faith communities as a bridge to help those who struggle with mental health issues. Our program would offer a unique access point for faith communities interested in helping address the mental health needs of immigrants and refugees while simultaneously assuring that our internal structure can support the growing needs of our immigrant and refugee communities.

[African Community Center](#)

[Asian Pacific Development Center](#)

[Colorado Immigrant Rights Coalition \(CIRC\)](#)

[Colorado Latino Leadership, Advocacy & Research Organization](#)

[The Colorado Office of Economic Security Division of Refugee Services](#)

[Denver Health's Refugee Clinic](#)

[International Rescue Committee](#)

[Lutheran Family Services Rocky Mountains](#)

[Padres & Jovenes Unidos](#)

[The Refugee Mental Health Program at CU Denver Department of Psychiatry](#)

[Rocky Mountain Immigrant Advocacy Network](#)

[Together Colorado](#)

[Village Exchange Center](#)

Additionally, we will coordinate with foreign consulates in metro Denver and with the diversity and international student centers/offices at colleges and universities in metro Denver.

7. Partnerships and Collaborations

List any organizations with which you partner or collaborate related to this request and describe your relationship with each.

The Mental Health Center of Denver already collaborates with numerous partner organizations in activities related to this request and has identified many with which it will forge new relationships.

We work with the following faith communities, among many others, to promote mental health and well-being and will increasingly place a special focus on assisting immigrant and refugee communities:

- Arevim Task force Denver (ATID) and Congregation Zera Avraham
- My Quiet Cave
- Capitol Hill United Ministries
- Metro Denver North Islamic Center -- Masjid Ikhlas
- Radha Krishna Temple

We additionally are seeking to establish a connection with the Denver Buddhist Culture Society, and others.

Other partners with which we work specifically to meet the needs of immigrant and refugee communities include:

- Clínica Tepeyac – collaborate to provide culturally responsive integrated primary and behavioral healthcare to Latino/Hispanic community members.
- CREA Results – collaborate to provide training and behavioral health support to vulnerable Latino/Hispanic immigrant community members.
- Denver Public Schools – school-based mental health consultants work with immigrant and refugee families.
- Focus Points Community Center – bi-lingual therapist delivers services to immigrants.
- Spring Institute for Intercultural Learning -- collaborate to provide interpretation and to produce materials translated into languages spoken by immigrant and refugee community members.

8. Time Frame

Provide the start and end dates for the program or project and any other important information in regards to timing.

October 1, 2017 through March 31, 2018.

9. Level of Evaluation and Measurement for this Program or Project

Please select from the list below and briefly describe practices in collecting, analyzing and using information related to this program or project.

- Self-Reported: Organization tracks Outputs and some Outcomes to the best of its ability.
- Third-Party Informal: Organization has contracted with an external evaluator for this program or project.
- Third-Party Quasi-Experimental: Organization has contracted with an external evaluator for this program or project. The evaluation includes a comparison group.
- Third-Party Experimental: Organization has contracted with an external evaluator for this program or project. The evaluation includes a comparison to a randomly-selected control group.

Brief description:

The Project Director has extensive experience conducting surveys using Qualtrics and in analyzing the results obtained.

10. Sustainability

Is there a plan to sustain elements of this project beyond the end of the grant period? Please describe.

The Mental Health Center of Denver is committed to providing services to all immigrants and refugees in need. By building our capacity to support faith communities and our staff who are serving immigrants and refugees under the direction of the Faith & Spiritual Inclusiveness Director, this program will continue to be sustained and promoted throughout all of our services moving forward.

With the help of this planning grant, our aim will be to establish and build strong relationships with our diverse faith communities throughout Denver who are also serving immigrants and refugees. Additionally, we plan to use this grant to further develop relationships with other organizations doing similar work who may not yet be working with faith communities. We expect our policies, signage, website and internal directory to also pay their dividends over time down the line with updates made as our organization continues to grow.

Where we may need additional funds to sustain our work might be with internal staff development trainings on working with immigrants and refugees, trainings on mental health needs specific to our diverse faith communities and sustaining our health navigator positions over time. These are all items that we will attempt to work into our operating budget, yet, with the current administration and political climate, we're unsure at this time what we'll have the capacity to fund over time.

11. Policy Implications

Does the purpose of this request have public policy implications? If so, please describe.

The recent decisions by the Mayor and the City Council with regard to sanctuary city policy and the governor's decision to join a multistate lawsuit in defense of Deferred Action for Childhood Arrivals (DACA) give us confidence that the current City and State administrations are supportive of immigrant and refugee communities.

We are hopeful that the success of this initiative may inspire more public funding for efforts such as ours to support vulnerable immigrant and refugee communities. The success of this initiative may also serve as a model for other organizations in this space.

12. Program or Project Plan and Outcomes

List **three to five** key program or project Activities. For each one, provide all Output Targets, Outcomes, Success Measures and Measurement Tools. Some Activities may have multiple Output Targets, Outcomes, Success Measures and Measurement Tools. Begin a new row for each Activity. This table should not exceed three pages. You will be asked to report on your work at the end of the grant period using this table. The Foundation will use this information to assess the impact of your work and to help us assess the impact of our grantmaking.

Activities Programmatic actions or methods the organization will undertake in an effort to achieve Impact.	Output Targets Quantifiable units of service the organization expects to deliver through its Activities.	Outcomes Results or changes the organization expects its Activities will achieve. Outcomes may be short-term (shortly following the activity) or long-term (measured after time has passed). Please describe all short-term Outcomes expected during the grant period and any long term Outcomes that provide relevant context.	Success Measures Observable measures that define success and indicate that the organization is making progress toward achieving its desired Impact. Measures should include the number or percentage of participants who will achieve each desired Outcome.	Measurement Tools Methods and instruments the organization uses to collect information about Outputs and Outcomes.
Ongoing outreach to and convening of faith communities serving refugee and immigrants	38 meetings (including six instances of the monthly Refugee Mental Health Consortium and <i>six instances of a convening of faith leaders interested in this work</i>). -We are working from an internal list of 50 faith institutions/referrals from other faith leaders.	Faith leaders and community members will feel an increased amount of support from the mental health community. Faith leaders will begin to identify MHCD as a referral agency for issues outside of pastoral counseling and care. Faith leaders will be able to identify sanctuary churches, mosques, temples and spaces amongst their peers.	75% of faith leaders/communities outreached to (37/50 organizations from our internal MHCD faith institutions list) will commit to undergoing a community-based mental health training on working with immigrants and refugees.	Internal partnerships tracking system manually updated with new and recurring partnerships with and within the faith community. This is currently updated weekly by the Faith & Spiritual Inclusiveness Director.
Training and curriculum development	The development of a 2-hour community-based training for faith communities to help	We will deliver a pilot training session on helping immigrants and refugees through crises and non-emergent mental	80% of the faith leaders pilot group (40/50) will find the training beneficial and would	We will use Qualtrics to deliver anonymous pre- and post-training surveys to determine the effectiveness and

	<p>immigrants and refugees adjust and attend to their mental health needs.</p> <p>The development of a 2-hour training for staff to help them in better working with and for immigrants and refugee clients.</p>	<p>health issues with faith community leaders.</p> <p>We will deliver a pilot training session on helping immigrants and refugees through crises and non-emergent mental health issues with MHCD staff members.</p>	<p>recommend this training to their faith leader peers.</p> <p>80% of the total number of staff members pilot group will find the training beneficial and would recommend this training to their peers. This number will depend on how many staff members we can recruit for this voluntary training).</p> <p>The activities, resources and offerings of our Serving Immigrants, Refugees and Asylees Employee Resource group will increase by 50%. This will look like increasing to 1-2 meetings/month, the leaders of this group helping to facilitate the 2-hour staff training and helping to develop our new policies and procedures as they relate to how we serve immigrants and refugee clients.</p>	<p>usefulness of the training presented to both faith leaders and internal MHCD staff members.</p> <p>The Faith & Spiritual Inclusiveness Director will track programmatic offerings from the Servings Immigrants, Refugees and Asylees Employee Resource Group to note differences in offerings from year to year.</p>
<p>Development of Faith Communities Resource Guide</p> <p>Development of Staff Resource Guide</p> <p>Development of Refugee/Immigrant Resource Guides</p>	<p>3-5 page guide for each population serving as a "what to do" and "how to" when immigrant and refugee issues come up within our communities.</p>	<p>Immigrants and refugees will have a better understanding of their rights when it comes to access to behavioral healthcare.</p> <p>Faith communities will have a better understanding of how to assist immigrants and refugees wishing to seek behavioral healthcare services.</p> <p>Staff will understand how to address the issues of immigrants and refugees directly related to behavioral healthcare needs.</p>	<p>100% of faith communities (50/50) we have outreached will receive guide for assisting immigrant and refugee community members.</p> <p>100% of MHCD staff members (850/850) will have access to guide to help in assisting immigrants and refugees in need.</p> <p>100% of immigrants and refugees requesting services will receive guide helping them understand their rights when it</p>	<p>We will use our internal Sharepoint system, InSite, and employee newsletter, Engage, to make these documents available to all staff members.</p> <p>We will use our outward-facing MHCD website to offer these guides to all community members. We will also work with our Digital Media Specialist to track how many hits we get to this new webpage on a daily, weekly, monthly, and quarterly basis and from where within our community and nation.</p>

			comes to receiving behavioral healthcare at MHCD. This will be made available online via our home webpage, www.mhcd.org , to all community members, and we will also provide this to our Access and front desk staff who help process intake requests.	
Hiring a Community Liaison/Navigator internship position.	<p>Creation of a new position description and goals for the intern.</p> <p>One intern hired for 22 weeks.</p>	<p>Hiring of an intern to increase our outreach to faith communities, and piloting a community liaison/navigator to work specifically with immigrants and refugees.</p> <p>Immigrants and refugees will feel more welcome and open to seeking mental health services when needed.</p> <p>We will effectively increase our bandwidth to serve more faith communities and immigrants and refugees through this internship position, while helping an intern gain access to real-life behavioral health experience.</p>	<p>We will have successfully recruited for a bi- or multilingual community liaison/navigator who will be trained to work with immigrants and refugees from diverse populations.</p> <p>We would have drafted a job description for a future permanent community liaison/navigator position specifically working with immigrants and refugees.</p>	<p>HR will have created a job posting ID number and will begin accepting internship applications.</p> <p>The Faith & Spiritual Inclusiveness Director will supervise intern.</p>